



CENTRAL FAX CENTER

MAY 09 2006

5775 Morehouse Drive,
San Diego, California 92121-2779
(858) 587-1121 Fax: (858) 658-2502

THIS MESSAGE IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL TO WHOM IT IS ADDRESSED AND CONTAINS INFORMATION THAT IS PRIVATE AND/OR PROPRIETARY. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately. Thank you!

Facsimile Transmittal

DATE: May 9, 2006
TO: USPTO - RCE/AMENDMENT
FAX: 571-273-8300
RE: Application No: 09/920,754
Filed: 8/1/01
FROM: George C. Pappas
FAX: (858)658-2502

Number of Pages Sent: 13 (including this transmittal cover sheet)
Attached hereto: Request for Continued Prosecution in (1) page;
Amendment in (10) pages; Transmittal letter in (1) page.

I hereby certify that this correspondence is sent VIA FACSIMILE to the
Commissioner of Patents, ALEXANDRIA, VA 22313,
571-273-8300, on:

5/9/06
(Date of Deposit)
Darla Kasmedo
(Name of the Person Making Deposit)
(Signature)
5/9/06
(Date of Signature)

RECEIVED
CENTRAL FAX CENTER

+ MAY 09 2006

T-513 P.002/013 F-610

U.S. Department of Commerce
Patent and Trademark Office
PATENT

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Customer No.: 23696
Attorney Docket No.: 010343
In Re Application of: Roberto Fabian Averbuj, et al.
Serial Number: 09/920,784
Filed: 8/1/01
Examiner: Daniel Ungar
Group Art Unit: 2132

Dear Sir:

Transmitted herewith for filing is a Response to Office Action and RCE in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	20	25	0	x \$50 =	\$0
Independent**	11	14	0	x \$200 =	\$0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$360	\$
EXTENSION FEES			<input type="checkbox"/> One Month	\$120	\$
			<input checked="" type="checkbox"/> Two Months	\$450	\$450
			<input type="checkbox"/> Three Months	\$1020	\$
RCE FEE				\$790	\$790
				TOTAL FEE	\$1240

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$1240. The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 5/9/06

Signature: George C. Pappas, 35,065
858-651-1306QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

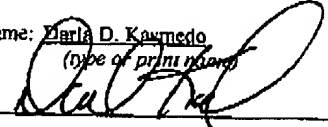
- ☐ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: _____
(type or print name)

Date: 5/9/06

FACSIMILE

- ☒ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Darla D. Kawmedo
(type or print name)Signature: 

(TRANSAMD.VER1.13-04/30/04)